Kumision Inangokkon Tano' CHamoru (CHamoru Land Trust Commission)

FORM B: OCCUPIER

P.O. Box 2950 Hagåtña, Guåhan 96932

AFFIDAVIT FOR ELIGIBILITY

Phone: 649-5263 ext. 815

____, being first duly sworn, deposes and says that: 1. The name of the individual seeking verification of eligibility is: 2. The individual, or their descendant, occupied, farmed, or ranched land on Guam for residential or agricultural purposes for at least one (1) year immediately prior to that land being acquired by the United States government between 1898 and 1968. If that land was acquired between December 8, 1941 and January 1, 1950, the one (1) year tenure need not have occurred immediately prior to the acquisition by the United States government. 3. The land acquired by the United States government is identified as one of the following: Parcel Number: _____ Address: Legal Description: Other Identifier: _____ The date the land was acquired by the United States: _____ 4. The name of the person or persons who occupied, farmed, or ranched the land: 5. The length of time the person or persons listed above continuously occupied, farmed, or ranched the land: _____ 6. The legal owner of the land: 7. The relationship between the legal owner of the land and the person or persons who occupied, farmed, or ranched the land: _____

8. Compensation or rent, if any, that was paid by the performanched the land to the legal owner:	·
Description of the nature of the person's or persons' the land was used for residential or agricultural purpose	es:
10. The type of activity being conducted on the land, su	
11. If the person or persons improved the land, the natuapplicable, list N/A):	
12. The undersigned makes these statements on behalthe applicant via a power of attorney.	If of themselves or as a representative of
Signature	Date
Subscribed and sworn to before me this day of _	, 20 by
-	NOTARY PUBLIC